Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Des Main Document Page 1 of 53

Fill in this information to identify your cas	ee:		
United States Bankruptcy Court for the:			
CENTRAL DISTRICT OF CALIFORNIA			
Case number (if known)		Chapter you are filing under:	
		Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Ра	identity Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Provide the second state of the second state of the second	
	Write the name that is on	Lisa	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Monique	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Jones	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Lisa M. Baumerts	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security		
	Individual Taxpayer Identification number	xxx-xx-3611	
	(ITIN)		

Main Document Page 2 of 5 & ase number (if known) Debtor 1 Lisa Monique Jones

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☐ I have not used any business name or EINs. DBA Valley Business Forms DBA Secret Strands Wig Boutique	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
	*************************************		TOP PROFESSION 1
5.	Where you live		If Debtor 2 lives at a different address:
		774 Oxen Street Paso Robles, CA 93446	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		San Luis Obispo	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
			The state of the s
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition,	Over the last 180 days before filing this petition, I
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Der	tor 1 Lisa Monique Jon	es		Main	Docur	nent	Page	3 of 53c	ase numbe	er (if known)		
Par	t 2: Tell the Court About Y	Your Bank	ruptcy Ca	se								
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.										
	choosing to file under	■ Chapt	er 7									
		☐ Chapt	er 11									
		☐ Chapt	er 12									
		☐ Chapt	er 13									
8.	How you will pay the fee	abo ord a p	out how yo er. If your re-printed	u may pa attorney address.	ay. Typical is submitti	ly, if you a ng your pa	re paying ayment or	the fee your your behalf	rself, you n f, your attor	nay pay with cas ney may pay wi	h, cashier's th a credit ca	t for more details check, or money ard or check with
		☐ I ne	ed to pay Filing Fe	the fee e in Insta	in installr Ilments (C	nents. If y Official For	ou choose m 103A)	this option	, sign and a	attach the Applic	ation for Inc	lividuals to Pay
		☐ I re but app	quest that is not requiles to you	t my fee uired to, v ur family s	be waive waive your size and y	d (You ma r fee, and ou are una	y request may do so able to pay	only if your the fee in it	income is nstallments	less than 150%	of the official this option.	aw, a judge may, al poverty line that you must fill out on.
												
9.	Have you filed for bankruptcy within the last 8 years?	■ No. □ Yes.										
			District				When			Case number		
			District				When			Case number		
			District				When			Case number		
10.	Are any bankruptcy	■ No										
	cases pending or being filed by a spouse who is not filing this case with you, or by a business	☐ Yes.										
	partner, or by an affiliate?											
			Debtor	1.5%						Relationship to	you	
			District				When			Case number, i	f known	
			Debtor							Relationship to	you	
			District		 		When			Case number, i	f known	
11.	Do you rent your	■ No.	Go to li	ne 12.								
	residence?	☐ Yes.	Has yo	ur landloi	rd obtaine	d an evicti	on judgme	ent against y	ou?			
					o line 12.							
					out <i>Initial</i> kruptcy pe		t About an	Eviction Ju	dgment Ag	ainst You (Form	101A) and	file it as part of

Deb	tor 1 Lisa Monique Jon	es	Main Document Page 4 of 5&ase number (if known)	
Part	Report About Any Bu	ısinesses	You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.	
		Yes.	Name and location of business	
	A sole proprietorship is a business you operate as		Valley Business Farms	
	an individual, and is not a		Valley Business Forms Name of business, if any	
	separate legal entity such as a corporation,		realite of Basilloss, if any	
	partnership, or LLC. If you have more than one		774 Oxen Street Paso Robles, CA 93446	
	sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code	
	it to this petition.		Check the appropriate box to describe your business:	
			Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))	
			■ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadline operation	 filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriates. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement is, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedul. C. 1116(1)(B). I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupto Code. 	of ire
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Coo	.et
Par	4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and		What is the hazard?	
	identifiable hazard to public health or safety?			
	Or do you own any		If immediate attention is	
	property that needs immediate attention?		needed, why is it needed?	
	For example, do you own			
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
			Number, Street, City, State & Zip Code	1

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Debtor 1

Part 5:

Lisa Monique Jones

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether vou have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about \Box credit counseling because of:

Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of
completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not red	quired to	receive	a briefing	about	credit
counseling	because	of:			

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	or 1 <u>Lisa Monique Jon</u>			ocument Page 6 c			
art	6: Answer These Questi	ons for R	eporting Purposes				<u> </u>
6.	What kind of debts do you have?	16a.	Are your debts primari individual primarily for a	ly consumer debts? Consum personal, family, or household	er debts are define l purpose."	d in 11 U.S.C. § 101	(8) as "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		ly business debts? Business investment or through the ope			tain
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts y	ou owe that are not consumer	debts or business	debts	
7.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	apter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	I am filing under Chapte are paid that funds will b ■ No □ Yes	r 7. Do you estimate that after be available to distribute to uns	any exempt proper ecured creditors?	ty is excluded and ad	dministrative expense
8.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,00 ☐ 50,001-100,0 ☐ More than100	00
9.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$1 □ \$10,000,001 - \$ □ \$50,000,001 - \$ □ \$100,000,001 -	550 million 5100 million	☐ \$500,000,001 ☐ \$1,000,000,0 ☐ \$10,000,000,0 ☐ More than \$5	01 - \$10 billion 001 - \$50 billion
0.	How much do you estimate your liabilities to be?	\$ 100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$1 □ \$10,000,001 - \$ □ \$50,000,001 - \$ □ \$100,000,001 -	\$50 million \$100 million	\$500,000,001 \$1,000,000,000 \$10,000,000	001 - \$10 billion ,001 - \$50 billion
ari	7: Sign Below						
or	you	I have ex	amined this petition, and	I declare under penalty of perj	ury that the informa	tion provided is true	and correct.
				oter 7, I am aware that I may pr the relief available under each			
				did not pay or agree to pay so ad the notice required by 11 U.		an attorney to help m	e fill out this
		l request	relief in accordance with	the chapter of title 11, United S	States Code, specif	ied in this petition.	
		l underst bankrupt and 357	cy case can result in fine:	ment, concealing property, or o sup to \$250,000, or imprisonm	btaining money or part for up to 20 year	property by fraud in o ars, or both. 18 U.S.0	connection with a C. §§ 152, 1341, 151
			onique Jones e of Debtor 1	Si	ignature of Debtor 2	2	
		Executed		<u> </u>	xecuted on		<u>andra de la compania del compania del compania de la compania del compania de la compania de la compania del compania de la compania del compania de la compania del compania de la compa</u>
			MM / DD / YYYY			DD / YYYY	

Debtor 1 Lisa Monique Jones

Main Document Page 7 of 5 & ase number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Signature of Attorney for Deletor

Date April 15, 2019 MM / DD / YYYY

Edwin J. Rambuski

Printed name

Law Offices of Edwin J. Rambuski

Firm name

1401 Higuera Street

San Luis Obispo, CA 93401-2915

Number, Street, City, State & ZIP Code

Contact phone (805) 546-8284

Email address

edwin@rambuskilaw.com

109602 CA

Bar number & State

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

No	assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
2. N o	(If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
3.	(If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partner director, officer, or person in control of the debtor, or any persons firms

of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has

been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at San Luis Obispo, California.

Date: April 15, 2019

Signature of Debtor 2

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Desc Fill in this information to identify your case: Debtor 1 Lisa Monique Jones First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number (if known) ☐ Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form, If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 525,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 10,214.79 1c. Copy line 63, Total of all property on Schedule A/B..... 535.214.79 Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 353,779.23 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 7,066.27 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 99,508.99 Your total liabilities 460,354.49 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 408.11 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 4,920.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4. Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

- Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

858.29

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,066.27
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total . Add lines 9a through 9f.	\$	7,066.27

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Desc Fill in this information to identify your case and this filing: Debtor 1 Lisa Monique Jones Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Check if this is an Case number amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2 Yes. Where is the property? What is the property? Check all that apply 1.1 774 Oxen Street Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home П Current value of the Current value of the CA 93446-0000 Land entire property? portion you own? Paso Robles \$525,000.00 \$525,000.00 State ZIP Code Investment property City П Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee simple Debtor 1 only San Luis Obispo Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Note: First Mortgage - Nationstar Mortgage, LLC: \$310,336.09; Second Mortgage - Chase Mortgage: \$43,443.14

 Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$525,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	tor 1 Lis	a Monique Jo	ones	Main Document	Page 12 of 53e	number (if known)	
3. C a	ars, vans, ti	ucks, tractors	sport utility vel	hicles, motorcycles			
	No						
	Yes						
_	165						
		V ia			4.2	Do not deduct secured cl	aims or exemptions. Put
3.1	Make:	Kia		Who has an interest in the	property? Check one	the amount of any secure	d claims on Schedule D:
	Model:	Optima		Debtor 1 only		Creditors Who Have Clai	ms Secured by Property.
	Year:	2013		Debtor 2 only		Current value of the	Current value of the
		te mileage:	69,000	Debtor 1 and Debtor 2 on		entire property?	portion you own?
	Other infor	mation:		At least one of the debtor	s and another		
				Check if this is communicated (see instructions)	nity property	\$8,000.00	\$8,000.00
5 # Part Do	No Yes Add the doll bages you h 3: Describe you own or	ar value of the ave attached f Your Personal a have any lega	portion you ow or Part 2. Write t and Household Ite I or equitable int	rn for all of your entries fro that number hereems terest in any of the following , china, kitchenware	om Part 2, including any o	entries for	\$8,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
1	Yes. Des	cribe					
		ef		ishings, appliances, pro ly and reasonably used i.			\$500.00
<i>E</i>		cluding cell pho		eo, stereo, and digital equipi nedia players, games	ment; computers, printers,	scanners; music collect	ions, electronic devices
		L	aptop, phone,	and two 12 year old TV	's		\$400.00
9. E	No No Yes. Des quipment f Examples: S	ntiques and figu ther collections cribe or sports and I	, memorabilia, co nobbies phic, exercise, ar	prints, or other artwork; boo illectibles nd other hobby equipment; b			
	No -						
Ĺ	☑ Yes. Des	cribe					

Debtor 1		bk-10693-DS e Jones	Doc 1 Fi Main Docu			ntered 04/ 3 o fc§ num	15/19 16:46:18 ber (if known)	B Desc
10. Fire a		s, shotguns, ammunitio	on, and related ec	quipment				
■ No	•							
☐ Ye	s. Describe							
	mples: Everyday cl	othes, furs, leather coa	ats, designer wea	r, shoes, acces	ssories			
□ No	es. Describe							
TE	s. Describe							
		Debtor's wearing	apparel		<u> </u>	· · · · · · · · · · · · · · · · · · ·		\$150.00
□ No	<i>mples:</i> Everyday je	welry, costume jewelr		ngs, wedding ri	ngs, heirloc	om jewelry, wat	ches, gems, gold, silv	
		Costume jewelry						\$43.00
Exa	a-farm animals amples: Dogs, cats, o es. Describe	birds, horses						
		Two golden retri	ovore					\$1.00
		Two golden redi	evers					
□ N		formation CPAP Machine	ou did not allea	ay iist, iiiciaa	ing any ne	atti alus you		\$80.00
	<u> </u>							
		of all of your entries number here				ages you have	attached	\$1,174.00
	Describe Your Final							
Do you	own or have any	legal or equitable int	erest in any of t	ne following?			pi D	urrent value of the ortion you own? o not deduct secured aims or exemptions.
ПΝ	amples: Money you o	have in your wallet, in			ox, and on I	hand when you	file your petition	
■ Y	es							
						Casl)	\$106.00
Ex	institutions	savings, or other finan . If you have multiple a	cial accounts; cel	rtificates of dep	osit; share n, list each	s in credit union	ns, brokerage houses,	and other similar
□ N ■ Y	lo 'es		In	stitution name:				
		17.1. Checkin	g R	abobank				\$17.00

			Pacific Premier Bank		
		17.2. Checking	*Note: Current balance is	e -\$1 <i>AA</i>	\$0.00
	· · · · · · · · · · · · · · · · · · ·	17.2. Checking	Note. Current balance is	3 - 41	
					^
		17.3. Checking	Pacific Premier Bank		\$0.79
18. B o	onds, mutual funds xamples: Bond funds	, or publicly traded stocks s, investment accounts with br	okerage firms, money market accoun	international design of the second of the se	
	No Yes	Institution or issuer	name:		
			tod and unincornerated husing	esses, including an interest in an LLC	C. partnership, and
	int venture	stock and interests in incorp	porated and unincorporated busine	asses, moraumy an intersection on a	
	Yes. Give specific in	nformation about them			
		Name of entity:		% of ownership:	
		Valley Business Fo	orms, a sole proprietorship	%	\$1.00
		Secret Strands Wig	g Boutique, a sole	100 %	\$1.00
		proprietorship			
	Yes. Give specific ii	nformation about them			
24 🖽	atiroment er nanci	Issuer name:	, 403(b), thrift savings accounts, or ot	her pension or profit-sharing plans	
21. R	atiroment er nanci	Issuer name:	, 403(b), thrift savings accounts, or oth	her pension or profit-sharing plans	
21. R	etirement or pension Examples: Interests i	lssuer name: on accounts in IRA, ERISA, Keogh, 401(k),	, 403(b), thrift savings accounts, or oth Institution name:	her pension or profit-sharing plans	
21. R E ■ □	etirement or pension in the second sec	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: and prepayments	Institution name:		ners
21. R	etirement or pension in the second of the se	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: and prepayments	Institution name: so that you may continue service or ut, public utilities (electric, gas, water),	use from a company , telecommunications companies, or oth	ners
21. R E 22. S	etirement or pension in the second of the se	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren	Institution name: so that you may continue service or ut, public utilities (electric, gas, water), Institution name or individua	use from a company , telecommunications companies, or oth al:	ners
21. R E E E E E E E E E E E E E E E E E E	etirement or pension in the second of the se	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren	Institution name: so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individual	use from a company , telecommunications companies, or oth al:	ners
21. R E E C C C C C C C C C C C C C C C C C	etirement or pension in the rests in the rest in the rests in the rests in the rests in the rests in the rest in the rests in the rests in the rests in the rests in the rest	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren	Institution name: so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individual	use from a company , telecommunications companies, or oth al:	ners
21. R E E E E E E E E E E E E E E E E E E	etirement or pensic Examples: Interests in No Yes. List each accordance ecurity deposits and your share of all unu Examples: Agreement No I Yes	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), bunt separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren et for a periodic payment of mo	Institution name: so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individual	use from a company , telecommunications companies, or oth al: nber of years)	ners
21. R E E E E E E E E E E E E E E E E E E	etirement or pensic Examples: Interests in No Yes. List each accordance ecurity deposits and your share of all unu Examples: Agreement No I Yes	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren of for a periodic payment of mo	Institution name: so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individuationey to you, either for life or for a numer.	use from a company , telecommunications companies, or oth al: nber of years) r a qualified state tuition program.	ners
21. R E E E E E E E E E E E E E E E E E E	etirement or pensic Examples: Interests in No Yes. List each accordance of the Courty deposits are your share of all unuse Examples: Agreement No I Yes. I No I Yes. Interests in an educt of U.S.C. §§ 530(b)(1) No I Yes.	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren et for a periodic payment of mo	Institution name: so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individuationey to you, either for life or for a number qualified ABLE program, or under tion. Separately file the records of any	use from a company , telecommunications companies, or oth al: nber of years) r a qualified state tuition program.	
21. R E E E E E E E E E E E E E E E E E E	etirement or pensic Examples: Interests i No Yes. List each accord Security deposits ar Your share of all unu Examples: Agreement No I Yes	Issuer name: on accounts in IRA, ERISA, Keogh, 401(k), ount separately. Type of account: nd prepayments used deposits you have made nts with landlords, prepaid ren et for a periodic payment of mo	Institution name: so that you may continue service or unit, public utilities (electric, gas, water), Institution name or individuationey to you, either for life or for a number qualified ABLE program, or under tion. Separately file the records of any	use from a company , telecommunications companies, or other al: nber of years) r a qualified state tuition program. y interests.11 U.S.C. § 521(c):	

Debtor	Case 9:19-bk-10693-DS Lisa Monique Jones	Doc 1 Filed Main Docume	04/15/19 nt Page	Entered 04/15/19 16 15 0 ¢5 3 number (if known)	:46:18	Desc
27. Lic <i>Ex</i>	enses, franchises, and other general int camples: Building permits, exclusive license	angibles es, cooperative associat	ion holdings, liq	uor licenses, professional licens	es	
	No					
□ Y	es. Give specific information about them	•				
Money	or property owed to you?					value of the
						deduct secured or exemptions.
28. Ta x	x refunds owed to you					
	Yes. Give specific information about them, i	ncluding whether you al	lready filed the r	eturns and the tax years		
		a de la companya de l				
	mily support					
	<i>xamples:</i> Past due or lump sum alimony, sp	ousal support, child sur	oport, maintenar	ice, divorce settlement, property	settlement	
١٠	Yes. Give specific information					
30. Oti Ex	her amounts someone owes you xamples: Unpaid wages, disability insurance benefits; unpaid loans you made		enefits, sick pay	, vacation pay, workers' compe	nsation, Socia	al Security
, 1	No hada a sa					
	Yes. Give specific information					
	terests in insurance policies examples: Health, disability, or life insurance	; health savings accoun	nt (HSA); credit,	homeowner's, or renter's insura	nce	
	Yes. Name the insurance company of each	policy and list its value.				
	Company name			Beneficiary:	Surrer value:	nder or refund
lf :	ny interest in property that is due you fro you are the beneficiary of a living trust, exp omeone has died.	om someone who has dect proceeds from a life	died insurance polic	y, or are currently entitled to rec	eive property	because
	No					
, D	Yes. Give specific information					
	aims against third parties, whether or no xamples: Accidents, employment disputes,			demand for payment		
	No					
	Yes. Describe each claim					
	ther contingent and unliquidated claims	of every nature, includ	ding countercla	ims of the debtor and rights t	o set off clair	ms
	No Yes. Describe each claim					
ш	res. Describe each claim					
35. Ar	ny financial assets you did not already li No	st				
	Yes. Give specific information					
	Add the dollar value of all of your entries or Part 4. Write that number here					\$125.79
Part 5:	Describe Any Business-Related Property Y	ou Own or Have an Intere	est In. List any rea	al estate in Part 1.		
	you own or have any legal or equitable intere	st in any business-relate	d property?			
	res. Go to line 38.					
I	CO. GO TO MIC OO.					

Current value of the

Best Case Bankruptcy

page 6

Part 7:

Debtor 1

Lisa Monique Jones

Main Document Page 17 of 58 number (if known)

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Par	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$525,000.00
56.	Part 2: Total vehicles, line 5	\$8,000.00		
57.	Part 3: Total personal and household items, line 15	\$1,174.00		
58.	Part 4: Total financial assets, line 36	\$125.79		
59.	Part 5: Total business-related property, line 45	\$915.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$10,214.79	Copy personal property total	\$10,214.79
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$535,214.79

Case 9:19-bk-10693-DS Filed 04/15/19 Entered 04/15/19 16:46:18 Doc 1 Desc Fill in this information to identify your case: Debtor 1 Lisa Monique Jones Middle Name Last Name First Name Debtor 2 Middle Name Last Name First Name (Spouse if, filing) CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 4/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Specific laws that allow exemption Amount of the exemption you claim Brief description of the property and line on Current value of the Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B C.C.P. § 704.730 (a)(3)(C) 774 Oxen Street Paso Robles, CA \$171,220.77 \$525,000.00 93446 San Luis Obispo County Note: First Mortgage - Nationstar 100% of fair market value, up to Mortgage, LLC: \$310,336.09; Second any applicable statutory limit Mortgage - Chase Mortgage: \$43,443,14 Line from Schedule A/B: 1.1 C.C.P. § 704.010 2013 Kia Optima 69,000 miles \$8,000.00 \$3,325.00 Line from Schedule A/B: 3.1 100% of fair market value, up to any applicable statutory limit C.C.P. § 704.020 \$500.00 Household furnishings, appliances, \$500.00 provisions and personal effects ordinarily and reasonably used by 100% of fair market value, up to any applicable statutory limit debtors. No one item exceeding \$725. Line from Schedule A/B: 6.1

\$400.00

TVs

C.C.P. § 704.020

\$400.00

100% of fair market value, up to

any applicable statutory limit

Laptop, phone, and two 12 year old

Line from Schedule A/B: 7.1

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Desc Main Document Page 1:9se of furtibler (if known) Debtor 1 Lisa Monique Jones Brief description of the property and line on Schedule A/B that lists this property Amount of the exemption you claim Specific laws that allow exemption Current value of the portion you own Copy the value from Schedule A/B Check only one box for each exemption C.C.P. § 704.020 Debtor's wearing apparel \$150.00 \$150.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Costume jewelry C.C.P. § 704.040 \$43.00 \$43.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **CPAP Machine** C.C.P. § 704.050 \$80.00 \$80.00 Line from Schedule A/B: 14.1 100% of fair market value, up to any applicable statutory limit C.C.P. § 704.060 Adding machine, laptop, and office \$391.00 \$391.00 supplies Line from Schedule A/B: 40.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Fill in this information to identify your case: Debtor 1 Lisa Monique Jones Last Name First Name Middle Name Debtor 2 Last Name First Name Middle Name (Spouse if, filing) CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column C Column B Column A 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Unsecured Value of collateral for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim that supports this portion Do not deduct the much as possible, list the claims in alphabetical order according to the creditor's name. if any value of collateral. claim \$525,000.00 \$0.00 \$43,443.14 Describe the property that secures the claim: **Chase Mortgage** 774 Oxen Street Paso Robles, CA Creditor's Name 93446 San Luis Obispo County Note: First Mortgage - Nationstar Mortgage, LLC: \$310,336.09; Second Mortgage - Chase Mortgage: \$43,443.14 As of the date you file, the claim is: Check all that 700 Kansas Lane apply. Monroe, LA 71203 ☐ Contingent ☐ Unliquidated Number, Street, City, State & Zip Code ☐ Disputed Nature of lien. Check all that apply. Who owes the debt? Check one. An agreement you made (such as mortgage or secured Debtor 1 only car loan) Debtor 2 only

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

Second Mortgage

4785

Judgment lien from a lawsuit

Other (including a right to offset)

Debtor 1 and Debtor 2 only

community debt

☐ Check if this claim relates to a

Date debt was incurred 2005

☐ At least one of the debtors and another

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Debtor 1 Lisa Monique Jones		Case number (if known)		
First Name Middle N	ame Last Name			
2.2 Nationstar Mortgage LLC	Describe the property that secures the clair	m: \$310,336.09	\$525,000.00	\$0.00
Creditor's Name	774 Oxen Street Paso Robles, CA			
	93446 San Luis Obispo County			
	Note: First Mortgage - Nationstar			
	Mortgage, LLC: \$310,336.09;			
	Second Mortgage - Chase	and the second of the second		
8950 Cypress Waters	Mortgage: \$43,443.14			
Blvd.	As of the date you file, the claim is: Check all	that		
Irving, TX 75063	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgag	e or secured		
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a		Mortgage		
community debt	Other (including a right to offset)	mortgago		
Date debt was incurred 2003	Last 4 digits of account number	1398		
	миров от применения по применения в применения в применения в применения в применения в применения в применени В применения в приме	www.exect.com	· · · · · · · · · · · · · · · · · · ·	
	Column A on this page. Write that number her	e: \$353,779	9.23	
If this is the last page of your form, add	the dollar value totals from all pages.	\$353,779	0.23	
Write that number here:				
Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
	be notified about your bankruptcy for a debt t	katusu aleaadu listad la Bast d	For example, if a collection	anencu ie
trying to collect from you for a debt you	owe to someone else. list the creditor in Part	 and then list the collection ag 	ency here. Similarly, if you	have more
than one creditor for any of the debts that	at you listed in Part 1, list the additional credit	ors here. If you do not have add	itional persons to be notifie	ed for any
debts in Part 1, do not fill out or submit t	his page.			
Name, Number, Street, City, State &	a Zip Code	On which line in Part 1 did you en	ter the creditor? 2.1	
Clear Recon Corp 4375 Jutland Drive		Last 4 digits of account number	83CA	
		Last 4 digits of account number _	03CA	
San Diego, CA 92117				
Name, Number, Street, City, State 8	Zip Code	On which line in Part 1 did you en	ter the creditor? 2.2	
Mr. Cooper				
P.O. Box 619094		Last 4 digits of account number _		
Dallas, TX 75261				

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Fill in this information to identify your case: Debtor 1 Lisa Monique Jones Middle Name Last Name First Name Dehtor 2 Last Name (Spouse if, filing) First Name Middle Name CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number Check if this is an (if known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known) Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. Yes List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Priority** Nonpriority Total claim amount \$0.00 California Department of Tax and Last 4 digits of account number 1507 \$2,366,27 \$2,366.27 2.1 Priority Creditor's Name Fee Administration When was the debt incurred? 2018 P.O. Box 942879 Sacramento, CA 94279-0001 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Unliquidated Disputed Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? No. Other. Specify Sales and Use Tax ☐ Yes

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Case 9:19-bk-10693-DS Filed 04/15/19 Entered 04/15/19 16:46:18 Doc 1 Main Document Pactes 23 un for 5 Br known) Debtor 1 Lisa Monique Jones \$0.00 \$300.00 \$300.00 Last 4 digits of account number 3611 2.2 Franchise Tax Board Priority Creditor's Name 2017 Bankruptcy Section, MS: A-340 When was the debt incurred? P.O. Box 2952 Sacramento, CA 95812-2952 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? No. ☐ Other. Specify ☐ Yes Estimated taxes due \$300.00 \$300.00 \$0.00 Last 4 digits of account number 3611 2.3 Franchise Tax Board Priority Creditor's Name When was the debt incurred? 2018 Bankruptcy Section, MS: A-340 P.O. Box 2952 Sacramento, CA 95812-2952 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes Estimated taxes due \$0.00 \$2,100.00 \$2,100.00 Internal Revenue Service Last 4 digits of account number 3611 2.4 Priority Creditor's Name When was the debt incurred? 2017 P.O. Box 7346 Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated No Other. Specify ☐ Yes Estimated taxes due

Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number 3611 \$2,000.00 \$2,0	00.00 \$0.
P.O. Box 7346	When was the debt incurred? 2018	
Philadelphia, PA 19101-7346		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
At least one of the debtors and another	☐ Domestic support obligations	
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	
is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
■ No	☐ Other. Specify	
Yes	Estimated taxes due	
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other	e alphabetical order of the creditor who holds each claim. If a creditor has more the	ncluded in Part 1. If more
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other.	this form to the court with your other schedules.	ncluded in Part 1, If more le Continuation Page of
No. You have nothing to report in this part. Submit Yes. Ist all of your nonpriority unsecured claims in the needled claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already in a creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. Ist all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name	e alphabetical order of the creditor who holds each claim. If a creditor has more the	ncluded in Part 1, If more le Continuation Page of
No. You have nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave.	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already in a creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. Ist all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already it is creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 0113	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already it is creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 0113 When was the debt incurred? 2018	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the necured claim, list the creditor separately for each chan one creditor holds a particular claim, list the othe lant 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code Who incurred the debt? Check one.	e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already in a creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 0113 When was the debt incurred? 2018 As of the date you file, the claim is: Check all that apply	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other at 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already in a creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 0113 When was the debt incurred? 2018 As of the date you file, the claim is: Check all that apply	ncluded in Part 1. If more le Continuation Page of Total claim
Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	e alphabetical order of the creditor who holds each claim, if a creditor has more it claim. For each claim listed, identify what type of claim it is. Do not list claims already it is creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 0113 When was the debt incurred? 2018 As of the date you file, the claim is: Check all that apply Contingent Unliquidated	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the needured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim, if a creditor has more it claim. For each claim listed, identify what type of claim it is. Do not list claims already it is creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Last 4 digits of account number 0113 When was the debt incurred? 2018 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	ncluded in Part 1. If more le Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already in a creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the claim in Part 3. If you have more than three nonpriority unsecured claims fill out the claim was the debt incurred? Last 4 digits of account number 0113	ncluded in Part 1, If more the Continuation Page of Total claim
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2. Aderans Hair Goods Nonpriority Creditor's Name 9135 Independence Ave. Chatsworth, CA 91311 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more the claim. For each claim listed, identify what type of claim it is. Do not list claims already in a creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the claim in the claim is considered claims. Last 4 digits of account number 0113 When was the debt incurred? 2018 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not	ncluded in Part 1, If more the Continuation Page of Total claim

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Main Document Pagecase roumbed (if known) Debtor 1 Lisa Monique Jones \$17,365.56 4.2 **Bank of America** Last 4 digits of account number 0530 Nonpriority Creditor's Name 1998 P.O. Box 982234 When was the debt incurred? El Paso, TX 79998-2234 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No. ■ Other Specify Credit card purchases ☐ Yes 4.3 \$15,582.55 Last 4 digits of account number 0247 **Bank of America** Nonpriority Creditor's Name When was the debt incurred? P.O. Box 982234 1996 El Paso, TX 79998-2234 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No No Other. Specify Credit card purchases ☐ Yes 4.4 **Chase Card Services** Last 4 digits of account number 4121 \$15,109.86 Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? 1982 Wilmington, DE 19850-5298 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims No. Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Credit card purchases ☐ Yes

Case 9:19-bk-10693-DS Filed 04/15/19 Entered 04/15/19 16:46:18 Doc 1 Main Document Pages 26 un fet 3 known) Debtor 1 Lisa Monique Jones \$5,932.87 Last 4 digits of account number 0794 4.5 **Home Depot Credit Services** Nonpriority Creditor's Name 2004 When was the debt incurred? P.O. Box 790328 Saint Louis, MO 63179 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No No ■ Other Specify Credit card purchases ☐ Yes \$28,000.00 Last 4 digits of account number 4.6 **Karlis Baumerts** None Nonpriority Creditor's Name When was the debt incurred? 2015 17397 Plaza Delores San Diego, CA 92128 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only □ Contingent □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No. ☐ Yes Other. Specify Loan \$1,371.20 Last 4 digits of account number 8238 4.7 Kohl's Nonpriority Creditor's Name 2005 When was the debt incurred? P.O. Box 3043 Milwaukee, WI 53201-3043 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No. ■ Other Specify Credit card purchases ☐ Yes

MGR Capital, Inc.	Last 4 digits of account number None	\$3,160.0
Nonpriority Creditor's Name		φ3,100.0
864 Osos Street, Suite A San Luis Obispo, CA 93401	When was the debt incurred? 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	it you did not
M No	☐ Debts to pension or profit-sharing plans, and other similar debts	
— No □ Yes		
⊔ Yes	Other Specify Loan	
Pacific Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number 2478	\$1.4
17901 Von Karman Avenue, Suite 1200	When was the debt incurred? 2019	
Irvine, CA 92614		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that	
ls the claim subject to offset?	report as priority claims	it you did not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify Overdrawn account	
Square Capital Nonpriority Creditor's Name	Last 4 digits of account number	\$1,858.
1455 Market Street, Suite 600 MSC 715	When was the debt incurred? 2018	
San Francisco, CA 94103		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce the	it you did not
ls the claim subject to offset?	report as priority claims	

Main Document Pacopas 2 Suno fet Gknown) Debtor 1 Lisa Monique Jones \$49.61 6319 **UPS** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2018 55 Glenlake Parkway NE Atlanta, GA 30328 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No. **Business expense of Valley Business** Other. Specify ☐ Yes 4.1 2 \$10,297.95 7373 Wilmer Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2016 P.O. Box 91047 Chicago, IL 60693 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No **Business expense of Valley Business** Other. Specify Forms ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Law Offices of Gary A. Bemis APC 3870 La Sierra Ave, Suite 239 Part 2: Creditors with Nonpriority Unsecured Claims Riverside, CA 92505 Last 4 digits of account number 6001 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address ☐ Part 1: Creditors with Priority Unsecured Claims Square Capital Line 4.10 of (Check one): 29053 Network Place Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60673 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.11 of (Check one): Synter Resource Group P.O. Box 63247 Part 2: Creditors with Nonpriority Unsecured Claims Charleston, SC 29406 Last 4 digits of account number 6319 Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Lisa Monique Jones

Main Document Page (if known)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	. \$	7,066.27
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6 d .	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	7,066.27
				NACTURE MADE	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	99,508.99

	Mana					
nation to identify your	case:					
Lisa Monique Jor	ies					
First Name	Middle Name	Last Name		- '		
First Name	Middle Name	Last Name				
ankruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA		<u>/</u>		
					_	f this is an
	Lisa Monique Jor First Name	First Name Middle Name	Lisa Monique Jones First Name Middle Name Last Name First Name Middle Name Last Name	Lisa Monique Jones First Name Middle Name Last Name First Name Middle Name Last Name	Lisa Monique Jones First Name Middle Name Last Name First Name Middle Name Last Name	Lisa Monique Jones First Name Middle Name Last Name First Name Middle Name Last Name ankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 □ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the c	ontract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
			State	ZIP Code	
	City		State	ZIF Code	M. M
2.2	Name				
	Name				
	Number	Street			
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	-		State	ZIP Code	
2.4	City		State	ZIF Gode	
2.4	Name				
	Name				
	Number	Street			
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
					<u>으로</u> 목도로 있는데 이번 사람들이 되었다. 그는 사람들이
	Number	Street	. 1 W		
				ZIP Code	
	City		State	ZIF COde	

Case 9:19-bk-10693-DS Filed 04/15/19 Entered 04/15/19 16:46:18 Doc 1 Desc Fill in this information to identify your case: Debtor 1 Lisa Monique Jones Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name CENTRAL DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages. write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D. line Name ☐ Schedule E/F, line ☐ Schedule G. line Number Street ZIP Code State City ☐ Schedule D. line 3.2 Name ☐ Schedule E/F, line ☐ Schedule G, line Number Street State ZIP Code City

Fill in this informati	on to identify your ca	se:		.,					
Debtor 1	Lisa Monique	e Jones			_				
Debtor 2 (Spouse, if filing)					-				
United States Bank	kruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA						
Case number (If known)						neck if this is: An amended A supplemer 13 income as	t showing po		hapter
Official For	rm 106I	And the second				MM / DD/ YY	VV		
	I: Your Inco	nma				WIIWI / DD/ TT			12/1
Part 1: Des	sheet to this form. (r spouse is not filing wi On the top of any addition	onal pages, write you	r name	and case	number (if k	nown). Ans	wer every o	luestio
 Fill in your e information. 			Debtor 1			Debtor 2	or non-filing	spouse	
	nore than one job,	Employment status	■ Employed			☐ Employ	yed		
information a	arate page with bout additional	Employment status	☐ Not employed			☐ Not em	ployed		
employers.		Occupation	Broker/Sales			<u> </u>			
self-employe	ime, seasonal, or d work.	Employer's name	Valley Business	Forms			<u> </u>		-
	nay include student er, if it applies.	Employer's address	774 Oxen Street Paso Robles, CA	93446					
		How long employed t	here? 39 years		1.				<u> </u>
Part 2: Give	e Details About Mor	nthly Income							
spouse unless you	are separated.	ate you file this form. If							
	filing spouse have mo a separate sheet to	ore than one employer, co this form.	ombine the information	for all e	mployers	for that persor	on the lines	s below. It yo	ou need
					For	Debtor 1	For Debto non-filing		
 List monthly deductions). 	y gross wages, sala If not paid monthly,	ry, and commissions (b calculate what the month	pefore all payroll ly wage would be.	2.	\$	0.00	\$	N/A	
3. Estimate an	d list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4. Calculate gr	ross Income. Add lii	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Jedio	r 1 L	isa Monique Jones	_	Case n	number (if known)			-
		iod mornique et al.	- -					
				For	Debtor 1	For	Debtor 2 or	
						non-	-filing spouse	
	Copy	line 4 here	4.	\$	0.00	\$	N/A	<u>A</u>
	List a	II payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	 ,
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/.	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	. \$	N/	
	5e.	Insurance	5e.	\$	0.00	. <u>\$</u>	N/	
	5f.	Domestic support obligations	5f.	\$	0.00	. \$ _	N/	
	5g.	Union dues	5g.	\$	0.00	\$	N/	
	5h.	Other deductions. Specify:	5h.+	· \$_	0.00	_ + \$	N/	
3.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	_ \$	N/	<u>'A</u>
8.	List :	all other income regularly received:		*				
٠.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	408.11	\$		/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N	<u>/A</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependen	nt					
	٠.	regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	8c.	\$	0.00	\$	N	/A
		settlement, and property settlement.	8d.		0.00			<u>/A</u>
	8d	Unemployment compensation	8e.	\$_	0.00			/A
	8e.	Social Security	.		0.00		<u> </u>	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance	се					
		that you receive, such as food stamps (benefits under the Supplemental ,						
		Nutrition Assistance Program) or housing subsidies.		¢	0.00	\$	N	I/A
		Specify:	8f.	\$_ \$	0.00			I/A
	8g.	Pension or retirement income	8g. 8h.		0.00	_ `		<u>//A</u>
	8h.	Other monthly income. Specify:	OII.	т ў	0.00			
		4 dd linna On i Oh i On i Od t On t Oft On t Oh	9.	s	408.11	ı s		N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	, O.		700.1	3 6		
			آ مُن		408.11 +	œ.	N/A = \$	408.1
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	408.11 +	,	N/A = \$	400.1
	A 44	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L		\			
	Auu	the entires in line to to be bester i and bester i						
	Cán	to all other regular contributions to the expenses that you list in Schedu	ıle J.					
	Stat	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, yo	<i>ile J.</i> our depe	ndent	s, your roomma	tes, and	1	
	Stat	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, yo	our depe					
	Stat Incli othe Do	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. In the control of the con	our depe					0.0
	Stat Incli othe Do	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, yo	our depe				Schedule J.	0.0
11.	Stat Inclu other Do I Spe	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not exify:	ot availa	the co	pay expenses	listed in	Schedule J. 11. +\$	0.0
11.	Stat Inclu other Do I Spe	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not exify:	ot availa	the co	pay expenses	listed in	Schedule J. 11. +\$	
11.	Stat Inclu other Do I Spe	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not exify: In the amount in the last column of line 10 to the amount in line 11. The refer that amount on the Summary of Schedules and Statistical Summary of Cere	ot availa	the co	pay expenses	listed in	Schedule J. 11. +\$	0.0 408.1
11.	Stat Incli othe Do Spe Add	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not exify: In the amount in the last column of line 10 to the amount in line 11. The refer that amount on the Summary of Schedules and Statistical Summary of Cere	ot availa	the co	pay expenses	listed in	Schedule J. 11. +\$ se. 12. \$	408. 1
11.	Stat Incli other Do I Spe Add Writ	te all other regular contributions to the expenses that you list in Schedulude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not cify: In the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Cerulies	ot availa	the co	pay expenses	listed in	Schedule J. 11. +\$ se. 12. \$	408.1
11.	Stat Incli other Do I Spe Add Writ	te all other regular contributions to the expenses that you list in Schedulude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not cify: In the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Cerulies	ot availa	the co	pay expenses	listed in	Schedule J. 11. +\$ se. 12. \$	408. 1
11.	Stat Incli othe Do I Spe Add Writ	te all other regular contributions to the expenses that you list in Schedu ude contributions from an unmarried partner, members of your household, your friends or relatives. Into include any amounts already included in lines 2-10 or amounts that are not exify: In the amount in the last column of line 10 to the amount in line 11. The refer that amount on the Summary of Schedules and Statistical Summary of Cere	ot availaresult is rtain Lia	the co	pay expenses ombined monthl and Related D	listed in y incom ata, if it	Schedule J. 11. +\$ se. 12. \$ Con	408.1 mbined nthly income

Fill in this information to identify your case:			
Debtor 1 Lisa Monique Jones	Check	c if this is:	
Lisa monique oones			V v
Debtor 2		An amended filing	
(Spouse, if filing)		A supplement snow 13 expenses as of t	ing postpetition chapter he following date:
United States Penkrupter Court for the CENTRAL DISTRICT OF CALLEORALA		<u> </u>	
United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA		MM / DD / YYYY	
Case number			
(If known)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filing together, information. If more space is needed, attach another sheet to this form. On the top number (if known). Answer every question.	both are equa of any additio	illy responsible fo nal pages, write y	r supplying correct
Part 1: Describe Your Household			
1. Is this a joint case?			
No. Go to line 2.			
☐ Yes. Does Debtor 2 live in a separate household?			
□ No			
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Hou	sehold of Debte	or 2.	
2. Do you have dependents? ■ No			
D. 10.10.10.10.10.10.10.10.10.10.10.10.10.1			
Do not list Debtor 1 and Pes. Fill out this information for each dependent Dependent's released between Debtor 1 or Debt		Dependent's age	Does dependent live with you?
Do not state the			□ No
dependents names.		<u></u>	☐ Yes
			□ No
			☐ Yes
			□ No
			☐ Yes
			□ No
			☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes			
yourson and your dependents:			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are using this expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedu applicable date.	form as a sup le J, check the	oplement in a Cha box at the top of	pter 13 case to report the form and fill in the
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)		Your expe	nses
 The rental or home ownership expenses for your residence. Include first mortgapayments and any rent for the ground or lot. 	nge 4. \$		2,752.47
If not included in line 4:	and an The ♥		-,,
4a. Real estate taxes	4a. \$	<u> </u>	533.33
4b. Property, homeowner's, or renter's insurance	4b. \$		70.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$. <u> </u>	0.00
4d. Homeowner's association or condominium dues	4d. \$		0.00
5. Additional mortgage payments for your residence, such as home equity loans	5. \$		0.00

Debi	tor 1 Lisa Monique Jones	Case numl	per (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	277.82
	6b. Water, sewer, garbage collection	6b.	\$	175.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	190.00
	6d. Other Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	385.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	12.00
	Personal care products and services	10.	\$	50.00
		11.	·	50.00
	Transportation. Include gas, maintenance, bus or train fare.	• • • • • • • • • • • • • • • • • • • •		00.00
	Do not include car payments.	12.	\$	205.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	Charitable contributions and religious donations	14.	\$	20.00
	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	89.38
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:		_	
	17a. Car payments for Vehicle 1	17a.		0.00
	17b. Car payments for Vehicle 2	17b.	•	0.00
	17c. Other. Specify:	17c.		0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not repo		\$	0.00
10	deducted from your pay on line 5, Schedule I, Your Income (Official Form 1)	061).	\$	0.00
19.	Other payments you make to support others who do not live with you.	19.	Ψ	0.00
20	Specify: Other real property expenses not included in lines 4 or 5 of this form or on		our Income	
20.	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
21			+\$	110.00
21.	Other: Specify: Pet expenses	۷۱.	1.0	110.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,920.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	6J-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,920.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	408.11
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,920.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c .	\$	-4,511.89
24.	Do you expect an increase or decrease in your expenses within the year affor example, do you expect to finish paying for your car loan within the year or do you expermodification to the terms of your mortgage? ☐ No	ter you file this ct your mortgage	s form? payment to increa	se or decrease because of a

□ No.	
-------	--

Explain here: Utility and house payments will decrease due to moving to smaller home Yes.

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United States Bankruptcy Court Central District of California

In re	Lisa Monique Jones		Case No.		
		Debtor(s)	Chapter	7	

BUSINESS INCOME AN	D EXPENSES	S	
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONL	Y INCLUDE information	n directly related to the busine	ess operation.)
PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:			
1. Gross Income For 12 Months Prior to Filing:	\$	24,992.66	
PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCO	ME:		
2. Gross Monthly Income		\$	1,400.00
PART C - ESTIMATED FUTURE MONTHLY EXPENSES:			
3. Net Employee Payroll (Other Than Debtor)	\$	0.00	
4. Payroll Taxes		0.00	
5. Unemployment Taxes		0.00	
6. Worker's Compensation	· · · · · · · · · · · · · · · · · · ·	0.00	
7. Other Taxes		0.00	
8. Inventory Purchases (Including raw materials)		700.00	
9. Purchase of Feed/Fertilizer/Seed/Spray		0.00	
10. Rent (Other than debtor's principal residence)		0.00	
11. Utilities		0.00	
12. Office Expenses and Supplies		0.00	
13. Repairs and Maintenance		0.00	
14. Vehicle Expenses		0.00	
15. Travel and Entertainment		0.00	
16. Equipment Rental and Leases		0.00	
17. Legal/Accounting/Other Professional Fees	<u> </u>	0.00	
18. Insurance		0.00	
19. Employee Benefits (e.g., pension, medical, etc.)		0.00	
20. Payments to Be Made Directly By Debtor to Secured Creditors For Pre-Petition E	Business Debts (Specify):		
DESCRIPTION	TOTAL		
21. Other (Specify):			
DESCRIPTION Phone, internet, stamps, bank fees, business license	TOTAL 291.89		
22. Total Monthly Expenses (Add items 3-21)			991.89
PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:			
23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2)		\$	408.11

-ill in this informat	tion to identify your	case:				
	Lisa Monique Jor		al de la completa de La completa de la co			
	First Name	Middle Name	Last Name			
Debtor 2						
Spouse if, filing)	First Name	Middle Name	Last Name			
Jnited States Bankr	ruptcy Court for the:	CENTRAL DISTRIC	CT OF CALIFORNIA			
Saaa mumbar						
Case number					☐ Check	if this is an
		Art e			amend	led filing
Official Form	106Dec					
	26 7 6 7 11 7	inaii/iai	IAI I IANTAKA SAN	פמווומפ		12/1
two married peopou	ole are filing togethe	er, both are equally re ile bankruptcy sched in connection with a	esponsible for supplying correct dules or amended schedules. No bankruptcy case can result in the	ct information.	ement, concealin 0, or imprisonm	g property, or ent for up to 20
two married peop ou must file this fo	ole are filing togethe orm whenever you f r property by fraud i J.S.C. §§ 152, 1341,	er, both are equally re ile bankruptcy sched in connection with a	esponsible for supplying correct	ct information.	ement, concealin 0, or imprisonm	g property, or ent for up to 20
two married peop ou must file this fo btaining money of ears, or both. 18 U	ole are filing togethe orm whenever you f r property by fraud i J.S.C. §§ 152, 1341,	er, both are equally re file bankruptcy sched in connection with a 1519, and 3571.	esponsible for supplying correct	et information. laking a false state fines up to \$250,00	ement, concealin 0, or imprisonm	g property, or ent for up to 20
two married peopou must file this fobtaining money or ears, or both. 18 L	ole are filing togethe orm whenever you f r property by fraud i J.S.C. §§ 152, 1341,	er, both are equally re file bankruptcy sched in connection with a 1519, and 3571.	esponsible for supplying correct dules or amended schedules. N bankruptcy case can result in t	et information. laking a false state fines up to \$250,00	ement, concealin 0, or imprisonm	g property, or ent for up to 20
two married peopou must file this fobtaining money of ears, or both. 18 U	ole are filing togethe orm whenever you f r property by fraud i J.S.C. §§ 152, 1341,	er, both are equally re file bankruptcy sched in connection with a 1519, and 3571.	esponsible for supplying correct dules or amended schedules. N bankruptcy case can result in t	et information. laking a false state fines up to \$250,00 nkruptcy forms?	0, or imprisonm	ent for up to 20
f two married peop you must file this for sbtaining money or ears, or both. 18 L Sign E Did you pay of	ole are filing togethe orm whenever you f r property by fraud i J.S.C. §§ 152, 1341,	er, both are equally re file bankruptcy sched in connection with a 1519, and 3571.	esponsible for supplying correct dules or amended schedules. N bankruptcy case can result in t	et information. laking a false state fines up to \$250,00 nkruptcy forms? Attach Bani	ement, concealin 0, or imprisonm kruptcy Petition P	ent for up to 20

Fill in this information	n to identify you	r case:			
Debtor 1	isa Monique Jo	ones			
	st Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) Fi	rst Name	Middle Name	Last Name		
United States Bankrup	otcv Court for the:	CENTRAL DISTRICT OF (CALIFORNIA		
	,				
Case number (if known)	,			_	neck if this is an nended filing
Official Corm	107				
Official Form Statement of		Affaira for Individ	uolo Eilina for D	onkruntov	4140
		Affairs for Individ			4/19
information. If more	space is needed,	ible. If two married people a , attach a separate sheet to t			
number (if known). A					
Part 1: Give Detai	Is About Your Ma	arital Status and Where You	Lived Before		
1. What is your cur	rent marital stati	us?			
☐ Married					
Not married					
2. During the last 3	years, have you	lived anywhere other than v	where you live now?		
No No					
_	of the places you	lived in the last 3 years. Do no	t include where you live now		
Debtor 1 Prior /	\ddress:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
		ver live with a spouse or legalifornia, Idaho, Louisiana, Nev			
No No		atelia de la composition de la composit La composition de la			
☐ Yes Make s	ure you fill out Sc	hedule H: Your Codebtors (Off	ficial Form 106H).		
Part 2 Explain th	e Sources of You	ır Income			
Fill in the total am	ount of income yo	mployment or from operating ou received from all jobs and a n have income that you receive	Il businesses, including part-	time activities.	dar years?
□ No					
Yes. Fill in the	ne details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of c		☐ Wages, commissions, bonuses, tips	\$1,147.99	☐ Wages, commissions, bonuses, tips	
		■ Operating a business		☐ Operating a business	

Case 9:19-bk-10693-DS Doc 1 Filed 04/15/19 Entered 04/15/19 16:46:18 Main Document Page 39 @fs 5 (3) Imber (if known) Debtor 1 Lisa Monique Jones Debtor 1 Debtor 2 Gross income Sources of income **Gross income** Sources of income (before deductions Check all that apply. Check all that apply. (before deductions and and exclusions) exclusions) \$8,250.00 For last calendar year: □ Wages, commissions, □ Wages, commissions. (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$8,500.00 For the calendar year before that: ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. Debtor 2 Sources of income **Gross income from** Sources of income Gross income Describe below. (before deductions Describe below. each source and exclusions) (before deductions and exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts?' Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment for ... Amount you Creditor's Name and Address Dates of payment Total amount

still owe

paid

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen- control, or owner of 20% or	eral partners; partners r more of their votin	erships of which yo ig securities; and ai	u are a general ny managing ag	partner; corporations gent, including one for
	■ No					
	Yes. List all payments to an insider.	NAME AND				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer	any property on a	ccount of a de	bt that benefited an
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment tor's name
Pa	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.	cy, were you a party in ar cases, small claims action	y lawsuit, court a s, divorces, collecti	ction, or administ on suits, paternity a	rative proceed actions, support	ing? or custody
	■ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11.		erty repossessed,	foreclosed, garni	shed, attached	l, seized, or levied?
	Yes. Fill in the information below.	Describe the Property		Date		Value of the
	Creditor Name and Address	Explain what happene	in angles de la companya di			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed		luding a bank or f	financial institutio	n, set off any a	mounts from your
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was n	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or	tcy, was any of your prop another official?	erty in the posses	sion of an assign	ee for the ben	efit of creditors, a
	■ No					
	☐ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gif	ts with a total valu	e of more than \$6	00 per person	?
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:	Describe the gifts			es you gave gifts	Value

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Debtor 1 Lisa Monique Jones

Debte	or 1	Lisa Monique Jones	Main Document	Page 41ca	Safe 5 G mber (if known)	
. 1		in 2 years before you filed for bankruptc No Yes. Fill in the details for each gift or contrib		or contributions	s with a total	value of more than	\$600 to any charity?
	mor Cha	s or contributions to charities that total e than \$600 rity's Name Iress (Number, Street, City, State and ZIP Code)	Describe what you	contributed		Dates you contributed	Value
Part	6:	List Certain Losses			· · · · · · · · · · · · · · · · · · ·		
		in 1 year before you filed for bankruptcy ambling?	or since you filed for ba	nkruptcy, did yo	ou lose anyt	hing because of thef	t, fire, other disaster,
. !		No Yes. Fill in the details.					
		v the loss occurred Incl	scribe any insurance cox ude the amount that insur urance claims on line 33 o	ance has paid. Li	st pending	Date of your loss	Value of property lost
Part	7:	List Certain Payments or Transfers			: 		
	cons	nin 1 year before you filed for bankruptcy sulted about seeking bankruptcy or prep ide any attorneys, bankruptcy petition prepa	aring a bankruptcy petit	ion?			rty to anyone you
		Yes. Fill in the details.				and a continuous and a second continuous and a second	aragamanananananan populatikan adalah di ammu <u>r</u>
	Add Em	son Who Was Paid dress ail or website address son Who Made the Payment, if Not You	Description and va transferred	lue of any prope	erty	Date payment or transfer was made	Amount of payment
	140 Sar edv	w Offices of Edwin J. Rambuski 01 Higuera Street n Luis Obispo, CA 93401-2915 win@rambuskilaw.com GR Capital, Inc.	Attorney Fees: \$ Filing Fee: \$335	2,500		4/11/19	\$2,835.00
	With	nin 1 year before you filed for bankruptcy mised to help you deal with your credito not include any payment or transfer that you	rs or to make payments	e acting on your to your creditor	behalf pay o	or transfer any prope	erty to anyone who
		No					
	STATE OF THE PARTY.	Yes. Fill in the details. rson Who Was Paid dress	Description and va transferred	lue of any prop	erty -	Date payment or transfer was made	Amount of payment
	tran Incli	hin 2 years before you filed for bankrupte esferred in the ordinary course of your be ude both outright transfers and transfers ma ude gifts and transfers that you have alread	usiness or financial affai ade as security (such as th	rs?			
		No					
		Yes. Fill in the details.					
	Ad	rson Who Received Transfer dress rson's relationship to you	Description and va property transferr			any property or s received or debts xchange	Date transfer was made

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Debto	or 1	Lisa Monique Jones	Main Document	Page 42 © fs 5	Gumber (if known)	
		n 10 years before you filed for bankrup ficiary? (These are often called asset-pro		y property to a self-se	ettled trust or similar devic	e of which you are a
		No				
	<u>،</u> د	Yes. Fill in the details.				
	Nam	e of trust	Description and v	alue of the property t	ransferred	Date Transfer was made
Part	8:	List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Storage	Units	
S	old, nclu nous	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, asso No	or other financial accou	nts; certificates of de	•	
[-	Yes. Fill in the details.				
	**********	e of Financial Institution and ress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
ı	eash	ou now have, or did you have within 1 , or other valuables? No Yes. Fill in the details.	year before you filed fo	r bankruptcy, any safe	e deposit box or other depo	ository for securities,
	100201000000000000000000000000000000000	e of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		ribe the contents	Do you still have it?
22. I	Have	you stored property in a storage unit	or place other than you	r home within 1 year k	pefore you filed for bankru	otcy?
		No				
I	_	Yes. Fill in the details.				
		ee of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		ribe the contents	Do you still have it?
Part	9:	Identify Property You Hold or Control	I for Someone Else			
	-	ou hold or control any property that so omeone.	omeone else owns? Incl	ude any property you	borrowed from, are storing	g for, or hold in trust
	_	No Yes. Fill in the details.				
	HING COUNTY	ner's Name PBSS (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		ribe the property	Value
Part	10:	Give Details About Environmental Inf	formation			
For th	ne pi	urpose of Part 10, the following definiti	ions apply:			

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- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Del	otor 1	Lisa Monique Jones	Main Document Pag	ge 43	@afse_ეფmber (#	known)	
24.	Hae a	any governmental unit notified you tha	at you may be liable or natestially	, liabla i			
	_	any governmental unit notified you the	at you may be hable of potentially	nable (under or in viol	ation of an environme	ental law?
	_	No Yes. Fill in the details.					
		ie of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, ZIP Code)	State and		ntal law, if you	Date of notice
25.	Have	you notified any governmental unit o	f any release of hazardous mater	ial?			
		No					
		Yes. Fill in the details.					
	20000000000	e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, ZIP Code)	State and		ntal law, if you	Date of notice
26.	Have	you been a party in any judicial or ad	ministrative proceeding under ar	ny envir	onmental law?	Include settlements	and orders.
		No					
		Yes. Fill in the details.					
	10000000000000000000000000000000000000	e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)		Nature of the o	ase	Status of the case
Pai	t 11:	Give Details About Your Business or	Connections to Any Business				
					. of the fellows:	4.	
21.		n 4 years before you filed for bankrup					/ business?
		A sole proprietor or self-employed				or part-time	
		A member of a limited liability com	pany (LLC) or limited liability par	tnership	o (LLP)		
		☐ A partner in a partnership					
		☐ An officer, director, or managing e	xecutive of a corporation				
		\square An owner of at least 5% of the voti	ng or equity securities of a corpo	ration			
		No. None of the above applies. Go to	Part 12.				
		Yes. Check all that apply above and fi	II in the details below for each bu	siness			
		ness Name	Describe the nature of the busi		Employer	Identification numbe	
	(Numl	oer, Street, City, State and ZIP Code)	Name of accountant or bookke	eper			
	Valle	ey Business Forms	Printing Broker		Dates bus EIN:	iness existed ***-**-3611	
		Oxen Street	Finding Diokei			3011	
	Pas	o Robles, CA 93446	None		From-To	1980 - current	
		ret Strands Wig Boutique S. Main Street	Wig sales, cancer support		EIN:	***-**-3611	
		pleton, CA 93465	None		From-To	9/2013 - current	
28.	Withi	n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give a financial state	ement to	anyone about	your business? Inclu	ude all financial
		No .					
		Yes. Fill in the details below.					
	Nam Addi (Numb		Date issued				
Par	t 12:	Sign Below					
ı ha	ve read	d the answers on this <i>Statement of Fi</i>	nancial Affairs and any attachme	nts, and	l declare unde	er penalty of perjury t	hat the answers

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

page 6

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Lisa Monique Jones
Signature of Debtor 2

Date April 15, 2019

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Lisa Monique Jones

Debtor 1

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Fill in this infor	mation to identify your	case:	SAN		
Debtor 1	Lisa Monique Jor				
	First Name	Middle Name	Last Name	* *	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA	· · · · · · · · · · · · · · · · · · ·	
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

entify the creditor and the property that is collateral	What do you intend to do with the property that	Did you claim the proper
	secures a debt?	as exempt on Schedule (
reditor's Chase Mortgage	☐ Surrender the property.	□ No
ame:	☐ Retain the property and redeem it.	
escription of 774 Oxen Street Paso Robles,	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
operty CA 93446 San Luis Obispo	Retain the property and [explain]:	
curing debt: County Note: First Mortgage -		
Nationstar Mortgage - Nationstar Mortgage, LLC:		
\$310,336.09; Second Mortgage -		
Chase Mortgage: \$43,443.14	Continue regular monthly payments	
reditor's Nationstar Mortgage LLC		□No
ame:	☐ Surrender the property.	⊔No
	Retain the property and redeem it.	■ Yes
escription of 774 Oxen Street Paso Robles,	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
roperty CA 93446 San Luis Obispo	Retain the property and [explain]:	
ecuring debt: County	and the first of t	
Note: First Mortgage -		
Nationstar Mortgage, LLC:		
\$310,336.09; Second Mortgage - Chase Mortgage: \$43,443.14	Continue regular monthly payments	

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escribe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
escription of leased operty:	☐ Yes
ssor's name:	□ No
operty:	☐ Yes
ssor's name:	□ No
escription of leased operty:	☐ Yes
ssor's name:	□ No
escription of leased operty:	☐ Yes
ssor's name:	□ No
escription of leased operty:	☐ Yes
ssor's name:	□ No
escription of leased operty:	□ Yes
ssor's name:	□ No
escription of leased operty:	□ Yes
art 3: Sign Below	

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B2030 (Form 2030) (12/15)

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United States Bankruptcy Court Central District of California

In re	Lisa Monique Jones		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF C		DNEV FOD DE	PTOD(S)	
	DISCLOSURE OF CO	OMPENSATION OF ATTO	KNEI FOR DE	DION(S)	
· c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bank ompensation paid to me within one year before rendered on behalf of the debtor(s) in conte	re the filing of the petition in bankrupto	y, or agreed to be paid	to me, for services re	ndered or to
	For legal services, I have agreed to accep	t <u> </u>	\$	2,500.00	
	Prior to the filing of this statement I have			2,500.00	
				0.00	
2. 7	The source of the compensation paid to me wa				
	☐ Debtor ■ Other (specify):	MGR Capital, Inc.			
3.	The source of compensation to be paid to me i	i s:			
	■ Debtor □ Other (specify):				
	- Debioi - Control (specify).				
1.	■ I have not agreed to share the above-discl	osed compensation with any other person	on unless they are mem	bers and associates of	f my law firm.
	☐ I have agreed to share the above-disclosed copy of the agreement, together with a list	d compensation with a person or person t of the names of the people sharing in t	s who are not members the compensation is atta	or associates of my lached.	aw firm. A
5.	In return for the above-disclosed fee, I have a	greed to render legal service for all asp	ects of the bankruptcy	case, including:	
1	a. Analysis of the debtor's financial situation b. Preparation and filing of any petition, sche c. Representation of the debtor at the meeting d. [Other provisions as needed] See Paragraph 6, below, for lim	edules, statement of affairs and plan wh g of creditors and confirmation hearing,	ich may be required;		ruptcy;
6. 1	2. Representation of the debtor 3. Representation of the debtor	isclosed fee does not include the follow r(s) at any adjourned or continued r(s) at any confirmation or discha r(s) in any adversary proceeding. r(s) at any Rule 2004 Examination	I meeting of credito rge hearings.	rs.	
		CERTIFICATION			
this b	I certify that the foregoing is a complete state ankruptcy proceeding.	ment of any agreement or arrangement	for payment to me for	representation of the	debtor(s) in
	pril 15, 2019 Date	Edwin J. Ramb	ouski	19	
, L		Signature of Atto	rney		
		Law Offices of	Edwin J. Rambusk	i	
		1401 Higuera S	Street po, CA 93401-2915		
			Fax: (805) 546-848	. 9	
Dr. Committee		edwin@rambu		· -	
		001111100,1011100	Skiiaw.com		

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	10 to 1	
Fill in this information to identify your case:	Check one box only as	directed in this form and in Form
Debtor 1 Lisa Monique Jones	122A-1Supp:	
Debtor 2 (Spouse, if filing)	■ 1. There is no pres	sumption of abuse
United States Bankruptcy Court for the: Central District of California	☐ 2. The calculation	to determine if a presumption of abuse
Case number		made under <i>Chapter 7 Means Test</i> ficial Form 122A-2).
(if known)	☐ 3. The Means Tes qualified militar	t does not apply now because of y service but it could apply later.
Official Form 122A - 1	☐ Check if this is a	an amended filing
Chapter 7 Statement of Your Current Month	v Income	12/15
Be as complete and accurate as possible. If two married people are filing together, both attach a separate sheet to this form. Include the line number to which the additional info case number (if known). If you believe that you are exempted from a presumption of abuqualifying military service, complete and file Statement of Exemption from Presumption Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11.	ormation applies. On the top of a	any additional pages, write your name and
■ Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and	d D. Bass 0 44	
☐ Married and your spouse is NOT filing with you. You and your spous		
☐ Living in the same household and are not legally separated. Fill ou		2-11
☐ Living separately or are legally separated. Fill out Column A, lines 2-		
penalty of perjury that you and your spouse are legally separated unde	er nonbankruptcy law that appl	ies or that you and your spouse are
living apart for reasons that do not include evading the Means Test req Fill in the average monthly income that you received from all sources, derived during 101(10A). For example, if you are filing on September 15, the 6-month period would be Ma the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do spouses own the same rental property, put the income from that property in one column or	g the 6 full months before you fi srch 1 through August 31. If the am o not include any income amount o	le this bankruptcy case. 11 U.S.C. § iount of your monthly income varied during
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, and commissions (b payroll deductions).	efore all \$ 0.00	\$
Alimony and maintenance payments. Do not include payments from a spo Column B is filled in.	use if \$ 0.00	
4. All amounts from any source which are regularly paid for household ex of you or your dependents, including child support. Include regular contr from an unmarried partner, members of your household, your dependents, pand roommates. Include regular contributions from a spouse only if Column E filled in. Do not include payments you listed on line 3.	penses ibutions arents.	\$
5. Net income from operating a business, profession, or farm	*	
Debtor 1		
Gross receipts (before all deductions) \$ 1,687.14 Ordinary and necessary operating expenses -\$ 1,253.85		
Ordinary and necessary operating expenses -\$ 1,253.85 Net monthly income from a business,	Сору	
profession, or farm \$ 433.29	here -> \$ 433.29	\$
Net income from rental and other real property Debtor 1		
Gross receipts (before all deductions) \$ 0.00		
Ordinary and necessary operating expenses -\$ 0.00	. h	
Net monthly income from rental or other real property \$0.00 Copy		\$ '\'\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
7. Interest, dividends, and royalties	\$	\$

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Debtor 1

Lisa Monique Jones

	A						
			Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation		\$	0.00	\$	P 2 - 2 2	
	Do not enter the amount if you contend that the amount received was a benefit up the Social Security Act. Instead, list it here:	nder			· ·		
	For you\$ 0.00						
	For your spouse \$	•					
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.		\$	0.00	\$		
10.	Income from all other sources not listed above. Specify the source and amou Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.						
	Dog care	_	\$	50.00	\$		
		_	\$	0.00	\$		
	Total amounts from separate pages, if any.	+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.		858.29	+		= \$_	858.29
				l L		Total	current monthly
Part	2: Determine Whether the Means Test Applies to You					incon	
12.	Calculate your current monthly income for the year. Follow these steps:						
	12a. Copy your total current monthly income from line 11		Conv	lino 11	horo->	s	050.00
	12a. Copy your total current monthly income non-line 11		Сору	line 11	ilere->	3 —	858.29
	Multiply by 12 (the number of months in a year)					X	12
					401-		10,299.48
	12b. The result is your annual income for this part of the form				12b	· \$	10,299.40
13.	Calculate the median family income that applies to you. Follow these steps:						
	Fill in the state in which you live.						**
	Fill in the number of people in your household.						
	Fill in the median family income for your state and size of household.				13.		57,962.00
	To find a list of applicable median income amounts, go online using the link spec for this form. This list may also be available at the bankruptcy clerk's office.	ified	in the separa	te instruc		a	07,002.00
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check	k box	1, There is n	o presun	nption of abus	е.	
	Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>Th</i> Go to Part 3 and fill out Form 122A-2.	ne pr	esumption of	abuse is	determined by	/ Form 1	22A-2.
Part							
	By signing here, declare under penalty of perjury that the information on the	vic ct	atomont and i	n any att	achmonto io tr	uo and a	
	X June 11. June Lisa Monique Jones	113 30	atement and t	ii aiiy au	aomiento io ti	ue and c	oneo.
	Signature of Debtor 1 Date April 15, 2019						
	MM / DD / YYYY						
	If you checked line 14a, do NOT fill out or file Form 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and file it with this form.						

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Attorney or Party Name, Address, Telephone &	Paxwae n	TFOR COUNT	DEE ONDS	1 1
State Bar No. & Email Address Edwin J. Rambuski				
1401 Higuera Street				
San Luis Obispo, CA 93401-2915				en e
(805) 546-8284 Fax: (805) 546-8489 California State Bar Number: 109602 CA				
edwin@rambuskilaw.com				
☐ Debtor(s) appearing without an attorney				
■ Attorney for Debtor				
UNITED	STATES B	ANKRUPT	CY COURT	
CENTR	RAL DISTRI	ICT OF CAI	LIFORNIA	
In re:		CASE NO.		
Lisa Monique Jones		CHAPTER		
		CHAPTER		
			VERIFICATION OF MASTE	
			MAILING LIST OF CREDITO	RS
			[LBR 1007-1(a)]	
			[25](100)-1(4)]	
<u> </u>	ebtor(s).			
Durayant to LDD 1007 1/a) the Dahter anthe Da				
Pursuant to LBR 1007-1(a), the Debtor, or the Demaster mailing list of creditors filed in this bankru	eptor's attor ptcv case o	ney it applic	cable, certifies under penalty of per f 3 sheet(s) is complete, correct	jury that the
consistent with the Debtor's schedules and I/we a	assume all r	esponsibilit	y for errors and omissions.	, and
			min. Juses	7
Date: April 15, 2019		Signa	ture of Debtor 1	<u></u>
		Olgyla	idire of Debtor 1	
Date:	<u> </u>			
		Signa	ture of Debtor 2 (joint debtor)) (if a	pplicable)
Date: April 15, 2019			11 1/1/1	1
		Signa	ture of Attorney for Debtor (if applic	able)

Aderans Hair Goods 9135 Independence Ave. Chatsworth, CA 91311

Bank of America P.O. Box 982234 El Paso, TX 79998-2234

California Department of Tax and Fee Administration P.O. Box 942879 Sacramento, CA 94279-0001

Chase Card Services P.O. Box 15298 Wilmington, DE 19850-5298

Chase Mortgage 700 Kansas Lane Monroe, LA 71203

Clear Recon Corp 4375 Jutland Drive San Diego, CA 92117

Franchise Tax Board
Bankruptcy Section, MS: A-340
P.O. Box 2952
Sacramento, CA 95812-2952

Home Depot Credit Services P.O. Box 790328 Saint Louis, MO 63179

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Karlis Baumerts 17397 Plaza Delores San Diego, CA 92128

Kohl's P.O. Box 3043 Milwaukee, WI 53201-3043

Law Offices of Gary A. Bemis APC 3870 La Sierra Ave, Suite 239 Riverside, CA 92505

MGR Capital, Inc. 864 Osos Street, Suite A San Luis Obispo, CA 93401

Mr. Cooper P.O. Box 619094 Dallas, TX 75261

Nationstar Mortgage LLC 8950 Cypress Waters Blvd. Irving, TX 75063

Pacific Premier Bank 17901 Von Karman Avenue, Suite 1200 Irvine, CA 92614 Square Capital 1455 Market Street, Suite 600 MSC 715 San Francisco, CA 94103

Square Capital 29053 Network Place Chicago, IL 60673

Synter Resource Group P.O. Box 63247 Charleston, SC 29406

UPS 55 Glenlake Parkway NE Atlanta, GA 30328

Wilmer P.O. Box 91047 Chicago, IL 60693